| 11 | | 33 WA | TER WELL RE | CORD Form WW | | 82a-1212 I | | | | |
|--|--|----------------|--------------------------|-------------------|------------------|-----------------------------|--------------------|---|---------------------------------|--|
| _ | | ATER WELL: | Fraction | | | ection Numb | · | } | Range Number | |
| County: | | | 1/ | 1111 | SW 1/4 | 33 | т 27 | S | R 1 E W | |
| Distance and direction from nearest town or city street address of well if located within city? | | | | | | | | | | |
| Southeast of the intersection of Clark and Topeka | | | | | | | | | | |
| 2 WATER WELL OWNER: City of Wichita RR#, St. Address, Box # : 455 N. Main Board of Agriculture, Division of Water Resources | | | | | | | | | | |
| 1 | aaress, Bo , ZIP Code | | | | | | Application | • | vision of water Resources | |
| | | | | COMPLETED WELL | 34.5 | ft. FLF | | | | |
| 3 LOCATE WELL'S LOCATION WITH 4 DEPTH OF COMPLETED WELL 34.5 ft. ELEVATION: unknown AN "X" IN SECTION BOX: Depth(s) Groundwater Encountered 1 ft. 2 ft. 3 ft. | | | | | | | | | | |
| Depth(s) Groundwater Encountered 1 ft. 2 ft. 3 ft. 3 ft. WELL'S STATIC WATER LEVEL not checked ft. below land surface measured on mo/day/yr | | | | | | | | | | |
| 1 | Pump test data: Well water was not checked ft after hours pumping on | | | | | | | | | |
| - | NWNE Est. Yield unknown gpm: Well water was ft. after hours pumping gpm | | | | | | | | | |
| <u> </u> | 1 1 1 2 2 36 5 5 5 5 5 5 5 5 5 | | | | | | | | | |
| = W | Bore Hole Diameterin. toft., and | | | | | | | | | |
| | 1 | <u> </u> | 1 Domestic | 3 Feedlot 6 | Oil field wat | er supply | 9 Dewatering | 12 | Other (specify below) | |
| - | - sw | SE | 2 Irrigation | 4 Industrial 7 | Domestic (la | awn & garden) | 10 Monitoring well | | Extraction Well | |
| <u> </u> | ₩as a chemical/bacteriological sample submitted to Department? Yes No V If yes, mo/day/yrs sample was submitted to Department? | | | | | | | | | |
| mitted Water Well Disinfected? Yes ✓ No | | | | | | | | | | |
| 5 TYPE C | F BLANK | CASING USED: | | 5 Wrought iron | 8 Cond | rete tile | CASING JO | DINTS: Glued | Clamped | |
| 1 Steel | | 3 RMP (SR) | | 6 Asbestos-Cement | 9 Othe | r (specify below | v) | | ed | |
| (2)PVC | | 4 ABS | | 7 Fiberglass | | | | Threa | ded Y | |
| l . | | er 10 3/4 | | 17.5 ft., Dia | | | ft., Dia | | in. to ft | |
| Casing height above land surface 0 in., weight 12.23 lbs./ft. Wall thickness or gauge No .593 | | | | | | | | | | |
| 1 | | OR PERFORAT | | | 7 PVC | | | bestos-cement | | |
| | | | | | | RMP (SR) 11 Other (specify) | | | | |
| | | | | | | | _ | ne used (open | • | |
| | | ORATION OPEN | | 5 Gauzed v | | | 8 Saw cut | | None (open hole) | |
| _ | ntinuous slot | | Mill slot | 6 Wire wrap | • | | 9 Drilled holes | | # | |
| 2 Louvered shutter 4 Key punched 7 Torch cut 10 Other (specify) ft. | | | | | | | | | | |
| SCREEN-PERFORATED INTERVALS: From 17.5 ft. to 34.5 ft., From ft. to ft. From ft. to ft., From ft. to ft. | | | | | | | | | | |
| CDAVEL DACK INTERVALE. From 45.2 # 40 20 # From 4 to | | | | | | | | | | |
| From ft. to ft., From ft. to ft. | | | | | | | | | | |
| 6 GROUT MATERIAL: 1 Neat cement 2 Cement grout 3 Bentonite 4 Other Bentonite Holeplug | | | | | | | | | | |
| | | • | | | Soil | | | | | |
| | ervals: Fro | | | | 0 | ft. to | | 13.3 | ft. to 15.3 ft. | |
| What is the nearest source of possible contamination: 10 Livestock pens 14 Abandoned water we 1 Septic tank 4 Lateral lines 7 Pit privy 11 Fuel storage 15 Oil well/Gas well | | | | | | | | | | |
| | | | | | | | | | | |
| 2 Sew | er iines ertight sewer | | Cess pool Seepage pit | 8 Sewage | - | 12 Fertilizer | J | None kn | er (specify below) | |
| | ū | iines o | Seepage pit | 9 Feedyard | 1 | 13 Insecticid | • | None Ki | OWII | |
| Direction f | | | | | | | any feet? | | | |
| FROM | то | | ITHOLOGIC LO | OG | FROM | то | PL | UGGING INT | TERVALS | |
| 0 | 3 | Topsoil | | | | | | | | |
| 3 | 8 | Clay, brown | | | | | | | | |
| 8 | 35 | | vel, fine, mediun | n, loose, clean | | | | | | |
| 35 | 36 | Shale, gray | | | | | | | | |
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| | | | | | | 1 | | | | |
| 7 CONTRACTOR'S OR LANDOWNER'S CERTIFICATION: This water well was (1) constructed (2) reconstructed (3) plugged under my jurisdiction and was | | | | | | | | | | |
| (-) resolution of the major ma | | | | | | | | | | |
| completed on (mo/day/year) 9-21-01 and this record is true to the best of my knowledge and belief. Kansas Water Well Contractor's License No 185 This Water Well Record was completed on (mo/day/yr) 9-26-01 9-21-01 29-21 | | | | | | | | | | |
| | | | 185 | | well Record | | by (signature) | 1 | 3-29-1/ | |
| | | me of Clarke W | | | o fill in blanks | | | three conice to | Cancac Department of Health and | |
| INSTRUCTIONS: Use typewriter or ball point pen. PLEASE PRESS FIRMLY and PRINT clearly. Please fill in blanks, underline or circle the correct answers. Send top three copies to Kansas Department of Health and Environment, Bureau of Water, Topeka, Kansas 66620-0001. Telephone 785-296-5524. Send one to WATER WELL OWNER and retain one for your records. Fee of \$5.00 for each constructed well. | | | | | | | | | | |